

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 06/29/2016
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 185246	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 08/20/2015
NAME OF PROVIDER OR SUPPLIER ROCKCASTLE HEALTH & REHABILITATION CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 371 WEST MAIN STREET BRODHEAD, KY 40409		
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F 000	INITIAL COMMENTS An abbreviated standard survey (complaint #KY23673) was initiated on 08/17/15 and concluded on 08/20/15. The complaint was substantiated with deficient practice identified at "E" level.	F 000			
F 367 SS=E	483.35(e) THERAPEUTIC DIET PRESCRIBED BY PHYSICIAN Therapeutic diets must be prescribed by the attending physician. This REQUIREMENT is not met as evidenced by: Based on observation, interview, and a review of the facility's policy it was determined the facility failed to provide a therapeutic diet in accordance with physician's orders for two (2) of three (3) unsampled residents (Residents A and B). Residents A and B had physician's orders to receive fortified foods. However, interview with dietary staff and observations of the tray line during the noon meal on 08/18/15 revealed Residents A and B were not served the fortified food for that meal, which dietary staff stated was mashed potatoes. Observations were also conducted of the residents' trays being delivered to the residents. Even though the residents' tray cards stated the residents should have fortified foods included in the noon meal, staff failed to identify that those foods had not been provided to the residents. Interview with staff revealed the facility had no system in place that informed direct care staff which foods were fortified on the resident's meal tray, to ensure facility residents received foods as ordered by the physician.	F 367		10/1/15	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

09/13/2015

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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F 367	<p>Continued From page 1</p> <p>The findings include:</p> <p>A review of the facility's policy titled "Fortified Foods," not dated, revealed fortified foods were utilized to add calories and protein, in efforts to address weight loss, skin status concerns, and nutritional concerns for facility residents. The policy further revealed the fortified foods to be added to a resident's diet included super cereal and super potatoes.</p> <p>Interview with the Dietary Manager on 08/18/15 at 3:00 PM revealed the facility had no policy related to therapeutic diets. However, dietary staff had been trained to look at each resident tray card, and prepare the residents' food trays in accordance with the residents' physician orders specified on the tray cards. The Dietary Manager stated the facility had no system in place to alert direct care staff as to which foods included on the residents' food trays had been fortified.</p> <p>Review on 08/18/15 of Resident A and Resident B's physician orders dated August 2015 revealed both residents had physician orders to receive fortified foods at meal times.</p> <p>Interview with Dietary Aide #2 on 08/18/15 at 11:20 AM revealed she would prepare facility residents' food trays for the noon meal. She stated the fortified food prepared for the noon meal on 08/18/15 was mashed potatoes. She also stated she had been trained to look at the tray cards to ensure residents' food trays were prepared correctly.</p> <p>Observations of dietary staff tray line preparation for facility residents on 08/18/15 at 11:30 AM revealed Resident A and Resident B's tray cards</p>	F 367			

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F 367	Continued From page 2 stated the residents were to receive fortified foods. However, Dietary Aide #2 failed to serve the residents the fortified food for the noon meal, which was mashed potatoes, as directed on the residents' tray cards. Observations of the noon meal on 08/18/15 at 11:45 AM revealed Residents A and B were delivered and served meal trays by State Registered Nurse Aide (SRNA) #3. The residents' tray cards were observed to direct staff that Resident A and Resident B were to receive fortified foods. However, neither resident's food trays included mashed potatoes, which was the fortified food served at the noon meal. Interview conducted with SRNA #3 on 08/18/15 at 12:00 PM revealed the SRNA had observed Resident A and Resident B's tray cards to state that the residents were to receive fortified foods. However, SRNA #3 stated she should have consulted with dietary staff because "I never know what food is supposed to be fortified, there's no way to tell." Interview with the Director of Nursing (DON) on 08/18/15 at 5:00 PM, revealed she acknowledged the facility had no system in place to ensure direct care staff knew what foods were fortified by dietary staff. However, the DON stated facility staff was trained to ensure foods were served to facility residents as directed by the physician, and dietary staff should have prepared and served foods as outlined on the residents' tray cards.	F 367			
F 371 SS=E	483.35(i) FOOD PROCURE, STORE/PREPARE/SERVE - SANITARY The facility must -	F 371			10/1/15

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F 371	<p>Continued From page 3</p> <p>(1) Procure food from sources approved or considered satisfactory by Federal, State or local authorities; and</p> <p>(2) Store, prepare, distribute and serve food under sanitary conditions</p> <p>This REQUIREMENT is not met as evidenced by: Based on interviews and a review of the facility policy it was determined the facility failed to store, prepare, distribute, and serve food under sanitary conditions for facility residents. Interviews with staff and residents revealed facility residents had been served milk, which was "clabbered" in appearance "off and on" since June of 2015, a period of two (2) months. Interviews also revealed dietary staff prepared food trays for two (2) facility residents (Residents #1 and #2) which were of the wrong consistency in August 2015 (unable to recall the exact date). Further interviews revealed when nursing staff returned the residents' food trays back to the Dietary Department to obtain the correct diet consistency ordered for the residents, dietary staff was observed to "scrape" the food into a container, located on the hot serving line area that contained food to be served to facility residents.</p> <p>The findings include:</p> <p>Review of the facility policy titled "Infection Control," not dated, revealed one way the facility would prevent the spread of infection would be to</p>	F 371			

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F 371	<p>Continued From page 4</p> <p>teach safe food handling practices to limit cross-contamination. The policy also stated preventing the spread of infection was particularly important since the ill and elderly were especially susceptible to infections.</p> <p>Review of the facility policy titled "Food Preparation," not dated, revealed all foods in the facility would be prepared to conserve nutrients, enhance flavor, and an attractive appearance of foods was to be maintained.</p> <p>1. Review of Resident #3's quarterly Minimum Data Set (MDS) assessment dated 07/22/15 revealed staff had assessed the resident to be interviewable with a Brief Interview for Mental Status (BIMS) score of 15.</p> <p>Interview with Resident #3 on 08/18/15 at 10:45 AM revealed the resident was served milk, with a "clabbered" appearance approximately four or five times in the "past few months." The resident stated the last time he/she had been served "clabbered milk" was approximately one week ago.</p> <p>Review of Resident B's quarterly MDS assessment dated 05/22/15, revealed staff had assessed the resident to be interviewable with a BIMS score of 10.</p> <p>Interview with Resident B on 08/18/15 at 11:45 AM revealed he/she had been served milk with a "clabbered" appearance a "few times" in the past "few months." Resident B stated the last time he/she was served "clabbered milk" was two or three days ago. The resident stated he/she has "staff to pour the milk over into a lid to make sure it is okay," because he/she "took a drink of</p>	F 371			

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F 371	<p>Continued From page 5</p> <p>clabbered milk one time" at the facility "and it almost made me sick."</p> <p>Review of the facility's list of BIMS scores for facility residents on 08/18/15 revealed Resident C had been assessed to be interviewable by facility staff with a BIMS score of 15.</p> <p>Interview with Resident C on 08/18/15 at 1:45 PM revealed milk with a "clabbered" appearance was served "often" in the facility. The resident stated, "last Friday or Saturday the girl was pouring milk onto my corn flakes and it was spoiled. It came out in clumps."</p> <p>Interview with Dietary Aide #1 on 08/18/15 at 3:30 PM revealed milk received in the facility and served to facility residents had been "clabbered off and on for a few months." The Dietary Aide stated, "We've tried to figure out why milk with a good date is spoiled," but acknowledged, "Nothing has really been done to fix the problem" for facility residents.</p> <p>Interview with State Registered Nurse Aide (SRNA) #1 on 08/18/15 at 4:00 PM revealed milk with a "clabbered" appearance, had been served to facility residents "on and off" for approximately two months. The SRNA stated the date would be "okay" on the milk carton; however, "we always have to smell and make sure the milk's not clabbered" before serving it to facility residents.</p> <p>Interview with the Dietary Manager on 08/18/15 at 3:00 PM revealed she stated, "We've been having bad milk for a month or longer." The Dietary Manager stated the milk would have a date which was not expired, but the milk was spoiled and had a "clabbered" appearance. She</p>	F 371			

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F 371	<p>Continued From page 6</p> <p>stated the facility's milk distributor had been contacted related to the concern of the "bad milk" and had stated the facility was the only customer that had complained of a problem with their milk. She stated the Dietary Department refrigerator where the milk is stored had been evaluated and no concerns had been identified; however, she had been notified of "bad milk" served to facility residents approximately one week ago, and acknowledged at the time of the interview that nothing had been done to correct the problem for facility residents.</p> <p>Interview with the Director of Nursing (DON) on 08/18/15 at 5:00 PM revealed she was aware that "clabbered milk" which had a date that was not expired, had been served to facility residents for a "couple of months." She stated the milk concern had been taken through multiple facility "channels." The DON acknowledged the root cause of the problem had not been identified, and no corrective action had been implemented at the time of the interview.</p> <p>2. Interview with State Registered Nurse Aide (SRNA) #1 on 08/18/15 at 4:00 PM revealed she and another staff member (SRNA #2) had delivered food trays to Resident #1 and Resident #2, which were the incorrect consistency in "early August" 2015 (unable to recall exact date). The SRNA stated the food trays were returned to the facility's Dietary Department and dietary staff was observed to take the food and "scrape" it from plates into an empty metal container, located on the hot serving line, where other food was located and uncovered. The SRNA stated she reported what she had witnessed to the Dietary Manager (who is now the Assistant Dietary Manager) at the time the incident</p>	F 371			

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F 371	<p>Continued From page 7 occurred.</p> <p>Interview with SRNA #2 on 08/18/15 at 4:10 PM revealed she had returned food, which had been in a resident's room, to the Dietary Department approximately two weeks ago. She stated she observed a dietary staff member take the plate of food and put the food from the resident's plate into an empty metal container on the food line, beside uncovered food that was to be served to other residents.</p> <p>Interview with the Assistant Dietary Manager (who was the Dietary Manager at the time the incident occurred) on 08/18/15 at 4:45 PM revealed she stated the incident had not been reported to her.</p> <p>Interview with Dietary Aide #2 on 08/20/15 at 9:00 AM revealed she had removed food from two resident plates that had been in resident care areas, and placed the food in an empty container on the hot serving line, a "few weeks ago" unsure of date. The Dietary Aide acknowledged that two SRNAs had witnessed the incident. She stated the Dietary Manager at the time the incident occurred had spoken with her about the incident, and had told her "not to do that anymore."</p> <p>Interview with the Director of Nursing (DON) on 08/18/15 at 5:00 PM revealed she had not been made aware of any incident related to Dietary staff placing food, after it had been taken from the Dietary Department, back onto the serving line where other food to be served to facility residents was located. The DON acknowledged food was considered contaminated when it left the Dietary Department and should never have been placed back into the serving area because of infection control concerns for facility residents.</p>	F 371			

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